## 2001 UNIFORM BUSINESS REPORT (UBR)

## May 17, 2001 8:00 am Secretary of State DOCUMENT # P99000102774 05-17-2001 91295 037 \*\*\*150.00 PIPO TRUCKING, INC. Principal Place of Business Mailing Address 11991 SW 7 ST 11991 SW 7 ST 000014 MIAMI FL 33184 MIAMI FL 33184 2. Principal Place of Business 3. Mailing Address 3242 Nu DO NOT WRITE IN THIS SPACE City & State . City & State 4. FEI Number Applied For 65-0966623 IRMI Not Applicable Coutry \$8.75 Additional 5. Certificate of Status Desired 43A 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MARTINEZ, ANA P 11991 SW 7 ST **MIAMI FL 33184** 3242 NW 68 5+ 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida (NOTE: Registed Agent signature required when reinstating) FILE NOW!!! FE IS \$150.00 9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fe will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. (See criteria on back) Make Check Payable to Epartment of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PRESIDENTAMOS TUSE R. RAMOS 3242 NW 6 8 St CR2E034 (10/00 TITLE Delete MARTINEZ, OSVALDO NÁF NAME ST:ET ADDRESS STREET ADDRESS 11991 SW 7 ST CIJ-ST-ZIP CITY-ST-ZIP **MIAMI FL 33184** TITLE **Delete** ☐ Change N/E ESPINOSA, LAZARO NAME STREET ADDRESS 11991 SW 7 ST STEET ADDRESS CI-ST-ZIP CITY-ST-ZIP MIAMI FL 33184 Delete Πİ ☐ Addition MARTINEZ, ANA P NAME N/E STET ADDRESS STREET ADDRESS 11991 SW 7 ST CITY-ST-ZIP **MIAMI FL 33184** -ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS ET ADDRESS CITY-ST-ZIP ST-ZIP TITLE ☐ Delete Change \* (E) 'Addition NAME STREET ADDRESS s**e**et address CITY-ST-ZIP CF-ST-ZIP TITLE ☐ Delete TLE ☐ Change Addition NAME ME STREET ADDRESS SIEET ADDRESS CY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify for the eemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this report or supplemental report is true and accurate and that my significant shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as redired by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

OR PRINTED NAME OF SIGNING OFFICER OR DIRCTOR

FILED